

Atty Dkt No. STAN190

T0.00.000 / Ab			Attorney Docket Number	STAN190	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			First Named Inventor	Zeng et al.	
			Application Number	Unassigned	
X Declaration	,.,	·	Filing Date	Herewith	
	Filing (surcharge (37	Group Art Unit	Unassigned		
		Filing (surcharge (37 CFR 1.16(c)) required)	Examiner Name	Unassigned	

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As a helow named inventor, I hereby	declare that:				
My residence, post office address, and e	citizenship are as stated below	next to my name.			
I believe I am the original, first and sele are listed below) of the subject matter w	e inventor (if only one name is which is claimed and for which	listed below) or an ori a patent la sought on t	ginal, first and jo he invention entit	int inventor (if p led:	slural names
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the specification of which:					
X is attached hereto					
OR war filed on	as United	Slatec Application Nu	mbas as DCT Inte		
	and was a	nended on	—-~		apon Number fapolicable).
I hereby state that I have reviewed and to any amendment specifically referred to	understand the contents of the				
Cacknowledge the duty to disclose infor	mation which is material to pa	montability as defined	by 37 CFR 1.56.		
Insofar as the subject matter of each of tapplication in the manner provided by a material to patentiability as defined in 3 national or PCT international filing date	7 CER 1.56 which become our	112 I sokaoudodoo d	a dute to disalace		
I hereby claim foreign priority benefits a certificate, or 365(n) of any PCF internal listed below and have also identified belopplication(s) having a filing date before	intonal application which design	nating at Jeast one cou	nuy other than the	. 71-1 I A	A A .
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority	Certified Con	y Atlached?
Mumber(s)	,	(MM/DD/YYYY)	Not Claimed	YES	NO
I hereby claim the benefit under 35 U.S.	C. 119(c) of any United States	provisional application	n(a) listed below		
Application Num			ling Date (MM/I		
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Any Dkt No. STAN190

U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)		
As a named invent	or, I hereby app	pint the follow	ring register	ed practit	tioner(s) to pr	rosecule this appli	cation and	to transtict al	l business in
Nam			ation Numi	ber		Name		Registratio	n Number
Karl Bozi Carol I., F Alan W. C Robert C. Kathlean S Carol Lat	rancis uqnou Hall I. Ifall		28,807 36,513 34,977 39,209 44,143 39,740		Pame Par Nic	Bret E. Field ela J. Sherwood ula A. Borden cole A. Verena theryl Franke		37,6 36,6 42,3 47,1 44,1	577 544 53
DIRECT ALL			E TO;						
Name		Sherwood					_		
Address		/IC, FIFI,D &		LLP					
Address	200 Midd	lofield Road, !	Suite 200						
City, State, Zip	Menle Pa	rk, CA 94025							
Country	U.S,A,			$\overline{}$	phone	650-327-3400	Facsing made or		550-327-3231
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